Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OHIO	_	
Case number (if known)	_ Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	you pictu exa	e the name that is on r government-issued ure identification (for mple, your driver's	Latonya First name D.	First name
	licer	nse or passport).	Middle name	Middle name
	iden	g your picture utification to your eting with the trustee.	Hayes Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ude your married or den names.		
3.	you nun Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx-xx-4541	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	20551 Trebec Blvd. Cleveland, OH 44119 Number, Street, City, State & ZIP Code Cuyahoga County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2 lives at a different address: Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Number, P.O. Box, Street, City, State & ZIP Code Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

Deb	otor 1	Latonya D. Hayes					Case number	er (if known)	
Par	t 2:	Tell the Court About \	∕our Bankr	uptcy C	ase				
7.	Bank	chapter of the cruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy						
	choc	sing to file under	■ Chapte	er 7					
			☐ Chapte	er 11					
			☐ Chapte	er 12					
			☐ Chapte	er 13					
8.	How	you will pay the fee	abo orde a pr I ne The but app	ut how your. If your e-printed ed to pa Filling Fequest that is not reclies to you	ou may pay. Typi attorney is subn address. y the fee in insta- ee in Installments at my fee be wai quired to, waive y ur family size an	ically, if you are paying nitting your payment on allments. If you choose is (Official Form 103A). ived (You may request your fee, and may do so d you are unable to pay	the fee yourself, you n your behalf, your attor this option, sign and a this option only if you only if your income is the fee in installments	erk's office in your local chay pay with cash, cashierney may pay with a credutattach the <i>Application for</i> are filing for Chapter 7. Eless than 150% of the offs). If you choose this options and file it with your person and some series of the offs.	er's check, or money lit card or check with relative Individuals to Pay by law, a judge may, ficial poverty line that on, you must fill out
9.	bank	you filed for ruptcy within the 3 years?	■ No.						
				District					
				District District		When When		Case number Case number	
				Diotriot					
10.	case filed not f you,	any bankruptcy s pending or being by a spouse who is illing this case with or by a business ner, or by an ate?	■ No □ Yes.						
				Debtor				Relationship to you	
				District		When		Case number, if known	
				Debtor				Relationship to you	
				District		When		Case number, if known	
11.		ou rent your	■ No.	Go to	line 12.				
	resid	lence?	☐ Yes.	Has yo	our landlord obta	ined an eviction judgme	nt against you?		
					No. Go to line 1		- •		
							Eviction Judgment Ad	gainst You (Form 101A) a	and file it as part of
					this bankruptcy		5 6	, ,	•

Deb	tor 1 Latonya D. Hayes			Case number (if known)
Pari	Report About Any Bu	sinesses	You Own as a Sole Prop	rietor
		1511105505	100 0WII 03 0 0010 1 10p	
2.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of	business
	A sole proprietorship is a			
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if a	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City,	State & ZIP Code
	it to this petition.		Check the appropriate	box to describe your business:
	·		☐ Health Care B	usiness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset R	leal Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (a	s defined in 11 U.S.C. § 101(53A))
			☐ Commodity Br	oker (as defined in 11 U.S.C. § 101(6))
			☐ None of the above	pove
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	es. If you indicate that you a	the court must know whether you are a small business debtor so that it can set appropriate are a small business debtor, you must attach your most recent balance sheet, statement of and federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am not filing under C	hapter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chap Code.	ter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chap	ter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
	·	Have Any	y Hazardous Property or	Any Property That Needs Immediate Attention
4.	Do you own or have any property that poses or is	■ No.		
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?	
	public health or safety? Or do you own any property that needs		If immediate attention is	
	immediate attention?		needed, why is it needed	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
				Number, Street, City, State & Zip Code

Debtor 1 Latonya D. Hayes

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101

Deb	tor 1 Latonya D. Hayes			Case numbe	「 (if known)		
Pari	t 6: Answer These Quest	ons for Re	porting Purposes				
16.	What kind of debts do you have?		Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."				
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
				iness debts? Business debts are debts ment or through the operation of the business.			
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c	State the type of debts you owe	e that are not consumer debts or busines	s debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7.	. Go to line 18.			
Do you estimate that after any exempt property is excluded an administrative expense		— 163.	are paid that funds will be avail	you estimate that after any exempt proplable to distribute to unsecured creditors?	erty is excluded and administrative expenses		
	are paid that funds will be available for distribution to unsecured creditors?		■ No □ Yes				
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-199 □ 200-999		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000		
19.	How much do you estimate your assets to be worth?	\$100,0	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
20.	How much do you estimate your liabilities to be?	\$100,0	0,000 01 - \$100,000 01 - \$500,000 01 - \$1 million	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
Pari	7: Sign Below						
For	you	I have exa	mined this petition, and I decla	re under penalty of perjury that the inforn	nation provided is true and correct.		
				am aware that I may proceed, if eligible, ef available under each chapter, and I ch	under Chapter 7, 11,12, or 13 of title 11, oose to proceed under Chapter 7.		
				t pay or agree to pay someone who is no notice required by 11 U.S.C. § 342(b).	t an attorney to help me fill out this		
		I request re	elief in accordance with the cha	apter of title 11, United States Code, spec	cified in this petition.		
		bankruptcy and 3571.		oncealing property, or obtaining money o \$250,000, or imprisonment for up to 20 y	r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		Latonya	D. Hayes of Debtor 1	Signature of Debtor	72		
		Executed	on May 8, 2019 MM / DD / YYYY	Executed on MM	/ DD / YYYY		

Official Form 101

Debtor 1	Latonya D. Hayes	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Debra E. Booher	Date	May 8, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
Debra E. Booher #0067804		
Printed name		
Debra Booher & Associates Co., LPA		
Firm name		
1350 Portage Trail		
Cuyahoga Falls, OH 44223		
Number, Street, City, State & ZIP Code		
Contact phone 330.253.1555	Email address	charlotte@bankruptcyinfo.com
#0067804 OH		
Bar number & State		

United States Bankruptcy Court Northern District of Ohio

In re	Latonya D. Hayes		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPE	NSATION OF ATTOR	NEY FOR DE	CBTOR(S)
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,500.00
	Prior to the filing of this statement I have received		\$	1,500.00
	Balance Due		\$	0.00
2.	\$_335.00 of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	■ I have not agreed to share the above-disclosed comp	pensation with any other person t	inless they are mem	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na			
6.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspects	of the bankruptcy c	ase, including:
	 a. Analysis of the debtor's financial situation, and rendebto. b. Preparation and filing of any petition, schedules, state. c. Representation of the debtor at the meeting of credited. d. [Other provisions as needed] Negotiation/execution of reaffirmation at All client calls/meetings during pendent public records searches for assets, filing Maintenance of case records after discrete. 	tement of affairs and plan which ors and confirmation hearing, and agreements cy of case and after dischar- ngs, suits, etc.	may be required; d any adjourned hea	
7.	By agreement with the debtor(s), the above-disclosed fe Representation of debtor in adversary p			
		CERTIFICATION		
	I certify that the foregoing is a complete statement of an ankruptcy proceeding.	y agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
N	lay 8, 2019	/s/ Debra E. Booh	er	
_	Date	Debra E. Booher #	‡ 0067804	
		Signature of Attorney Debra Booher & A		PA
		1350 Portage Trail		
		Cuyahoga Falls, C 330.253.1555 Fax		
		charlotte@bankru		
		Name of law firm		

STATEMENT OF INFORMATION REQUIRED BY 11 U.S.C. §341

INTRODUCTION

Pursuant to the Bankruptcy Reform Act of 1994, the Office of the United States Trustee, United States Department of Justice, has prepared this information sheet to help you understand some of the possible consequences of filing a bankruptcy petition under chapter 7 of the Bankruptcy Code. This information is intended to make you aware of...

- (1) the potential consequences of seeking a discharge in bankruptcy, including the effects on credit history;
- (2) the effect of receiving a discharge of debts
- (3) the effect of reaffirming a debt; and
- (4) your ability to file a petition under a different chapter of the Bankruptcy Code.

There are many other provisions of the Bankruptcy Code that may affect your situation. This information sheet contains only general principles of law and is not a substitute for legal advice. If you have questions or need further information as to how the bankruptcy laws apply to your specific case, you should consult with your lawyer.

WHAT IS A DISCHARGE?

The filing of a chapter 7 petition is designed to result in a discharge of most of the debts you listed on your bankruptcy schedules. A discharge is a court order that says you do not have to repay your debts, but there are a number of exceptions. Debts which may not be discharged in your chapter 7 case include, for example, most taxes, child support, alimony, and student loans; court-ordered fines and restitution; debts obtained through fraud or deception; and personal injury debts caused by driving while intoxicated or taking drugs. Your discharge may be denied entirely if you, for example, destroy or conceal property; destroy, conceal or falsify records; or make a false oath. Creditors cannot ask you to pay any debts which have been discharged. You can only receive a chapter 7 discharge once every eight (8) years.

WHAT ARE THE POTENTIAL EFFECTS OF A DISCHARGE?

The fact that you filed bankruptcy can appear on your credit report for as long as 10 years. Thus, filing a bankruptcy petition may affect your ability to obtain credit in the future. Also, you may not be excused from repaying any debts that were not listed on your bankruptcy schedules or that you incurred after you filed for bankruptcy.

WHAT ARE THE EFFECTS OF REAFFIRMING A DEBT?

After you file your petition, a creditor may ask you to reaffirm a certain debt or you may seek to do so on your own. Reaffirming a debt means that you sign and file with the court a legally enforceable document, which states that you promise to repay all or a portion of the debt that may otherwise have been discharged in your bankruptcy case. Reaffirmation agreements must generally be filed with the court within 60 days after the first meeting of the creditors.

Reaffirmation agreements are strictly voluntary — they are not required by the Bankruptcy Code or other state or federal law. You can voluntarily repay any debt instead of signing a reaffirmation agreement, but there may be valid reasons for wanting to reaffirm a particular debt.

Reaffirmation agreements must not impose an undue burden on you or your dependents and must be in your best interest. If you decide to sign a reaffirmation agreement, you may cancel it at any time before the court issues your discharge order or within sixty (60) days after the reaffirmation agreement was filed with the court, whichever is later. If you reaffirm a debt and fail to make the payments required in the reaffirmation agreement, the creditor can take action against you to recover any property that was given as security for the loan and you may remain personally liable for any remaining debt.

OTHER BANKRUPTCY OPTIONS

You have a choice in deciding what chapter of the Bankruptcy Code will best suit your needs. Even if you have already filed for relief under chapter 7, you may be eligible to convert your case to a different chapter.

Chapter 7 is the liquidation chapter of the Bankruptcy Code. Under chapter 7, a trustee is appointed to collect and sell, if economically feasible, all property you own that is not exempt from these actions.

Chapter 11 is the reorganization chapter most commonly used by businesses, but it is also available to individuals. Creditors vote on whether to accept or reject a plan, which also must be approved by the court. While the debtor normally remains in control of the assets, the court can order the appointment of a trustee to take possession and control of the business.

Chapter 12 offers bankruptcy relief to those who qualify as family farmers. Family farmers must propose a plan to repay their creditors over a three-to-five year period and it must be approved by the court. Plan payments are made through a chapter 12 trustee, who also monitors the debtor's farming operations during the pendency of the plan.

Finally, chapter 13 generally permits individuals to keep their property by repaying creditors out of their future income. Each chapter 13 debtor writes a plan which must be approved by the bankruptcy court. The debtor must pay the chapter 13 trustee the amounts set forth in their plan. Debtors receive a discharge after they complete their chapter 13 repayment plan. Chapter 13 is only available to individuals with regular income whose debts do not exceed \$1,347,500 (\$336,900 in unsecured debts and \$1,010,650 in secured debts).

AGAIN, PLEASE SPEAK TO YOUR LAWYER IF YOU NEED FURTHER INFORMATION OR EXPLANATION, INCLUDING HOW THE BANKRUPTCY LAWS RELATE TO YOUR SPECIFIC CASE.

/s/ Latonya D. Hayes	May 8, 2019
Debtor's Signature	Date

Fill	in this informat	ion to identify your	case:			
Deb	tor 1	Latonya D. Hayes	i			
Deh	tor 2	First Name	Middle Name	Last Name		
	_	First Name	Middle Name	Last Name		
Unit	ed States Bankr	uptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Cas	e number					
(if kno	own)				_	ck if this is an nded filing
					ano	naca ming
∩ff	icial Form	n 106Sum				
			and Liabilities ar	nd Certain Statistical Information		12/15
infor	mation. Fill out original forms,	all of your schedule	es first; then complete th	e are filing together, both are equally responsible to the information on this form. If you are filing amend the box at the top of this page.		
						assets of what you own
1.	Schedule A/B: 1a. Copy line 5	Property (Official Foots, Total real estate, for	orm 106A/B) om Schedule A/B		\$	118,700.00
	1b. Copy line 6	2, Total personal pro	perty, from Schedule A/B		\$	37,432.86
	1c. Copy line 63	3, Total of all property	on Schedule A/B		\$	156,132.86
Part	2: Summariz	ze Your Liabilities				
						liabilities nt you owe
2.			aims Secured by Property nn A, Amount of claim, at	(Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule D</i>	\$	145,290.49
3.	Schedule E/F: 0 3a. Copy the to	Creditors Who Have otal claims from Part	Unsecured Claims (Officia 1 (priority unsecured claim	I Form 106E/F) as) from line 6e of <i>Schedule E/F</i>	\$	5,377.25
	3b. Copy the to	otal claims from Part	2 (nonpriority unsecured c	laims) from line 6j of Schedule E/F	\$	56,137.13
				Your total liabilities	\$	206,804.87
Part	3: Summariz	ze Your Income and	Expenses			
4.		ur Income (Official Fo		1	\$	2,902.55
5.		ur Expenses (Official thly expenses from li			\$	2,897.51
Part	4: Answer T	hese Questions for	Administrative and Stati	istical Records		
6.	, ,	• •	er Chapters 7, 11, or 13? on this part of the form. C	heck this box and submit this form to the court with y	our other s	chedules.
	■ Yes					
7.	What kind of d	lebt do you have?				
				debts are those "incurred by an individual primarily fo	r a persona	al, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

page 1 of 2

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Official Form 106Sum

Best Case Bankruptcy

Summary of Your Assets and Liabilities and Certain Statistical Information

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,626.01

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cla	aim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	5,377.25
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	5,377.25

	r1 La	tonya D. I	Haves					
		t Name		e Name	Last Name			
Debtoi Spouse		st Name	Middle	e Name	Last Name			
Jnited	States Bankrupt	tcy Court for	rthe: NORTHER	N DIST	RICT OF OHIO			
Case r	number							☐ Check if this is a
								amended filing
)ffic	cial Form	106A/F	2					
	nedule A	_	_					12/15
				an asset	t only once. If an asset fits in more than	one category li	st the asset in	
□ N	o. Go to Part 2.							
■ Ye	es. Where is the pr	roperty?						
.1	·			What	t is the property? Check all that apply			
.1 _ 2	es. Where is the property of t	Blvd.	scription	What ■ □	Single-family home Duplex or multi-unit building	the amoun	nt of any secure	aims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property.
.1 2 S	0551 Trebec E	Blvd. ble, or other des		■	Single-family home Duplex or multi-unit building Condominium or cooperative	the amoun Creditors I	nt of any secure	d claims on Schedule D:
.1 2 S	0551 Trebec E treet address, if availat	Blvd. ble, or other des	44119-0000	=	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Current va	nt of any secured Who Have Clair alue of the perty?	d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
.1 2 S	0551 Trebec E	Blvd. ble, or other des			Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	Current vaentire pro	alue of the perty?	d claims on Schedule D: ns Secured by Property. Current value of the
.1 2 S	0551 Trebec E treet address, if availat	Blvd. ble, or other des	44119-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Current va entire pro \$1 Describe to (such as f	alue of the perty? 18,700.00 the nature of y	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$118,700.00
2 S C C C C	0551 Trebec E treet address, if availal Cleveland	Blvd. ble, or other des	44119-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	Current va entire pro \$1 Describe to (such as f	alue of the perty? 18,700.00 the nature of y fee simple, tenste), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$118,700.00 our ownership interest
2 S C C C C C C C C C C C C C C C C C C	0551 Trebec E treet address, if availat Cleveland ity	Blvd. ble, or other des	44119-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check on Debtor 1 only Debtor 2 only	Current va entire pro \$1 Describe (such as f a life estate)	alue of the perty? 18,700.00 the nature of y fee simple, tenste), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$118,700.00 our ownership interest
2 S C C C C C C C C C C C C C C C C C C	0551 Trebec E treet address, if availal Cleveland	Blvd. ble, or other des	44119-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check on Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current va entire pro \$1 Describe (such as f a life estar	alue of the perty? 18,700.00 the nature of y ee simple, tente), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$118,700.00 our ownership interest
2 S C C C C C C C C C C C C C C C C C C	0551 Trebec E treet address, if availat Cleveland ity	Blvd. ble, or other des	44119-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check on Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current va entire pro \$1 Describe (such as f a life estar Fee sim	alue of the perty? 18,700.00 the nature of y ee simple, tente), if known. apple k if this is compared to the six compared t	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$118,700.00 our ownership interest ancy by the entireties, o
1.1 2 s	0551 Trebec E treet address, if availat Cleveland ity	Blvd. ble, or other des	44119-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check on Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another or information you wish to add about this	Current va entire pro \$1 Describe (such as f a life estar Fee sim	alue of the perty? 18,700.00 the nature of y ee simple, tente), if known. apple k if this is compared to the six compared t	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$118,700.00 our ownership interest ancy by the entireties, o

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Deb	tor 1 L	atonya D. Hay	es		Case number (if known)	
3. C	ars, vans	, trucks, tractors	s, sport utility ve	hicles, motorcycles		
	No					
	Yes					
3.1	Make:	Dodge		Who has an interest in the property? Check one		cured claims or exemptions. Put y secured claims on Schedule D:
	Model:	Charger		Debtor 1 only		ave Claims Secured by Property.
	Year:	2015 mate mileage:	59,000	Debtor 2 only	Current value of entire property?	
		formation:	58,000	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
				— At least one of the debiots and another	^ 1	• • • • • • • • • • • • • • • • • • • •
				☐ Check if this is community property (see instructions)	\$17,87	3.00 \$17,873.00
5 A p	3: Descri you own o ousehold Examples:	be Your Personal or have any lega	or Part 2. Write of and Household Ite of equitable into ishings	n for all of your entries from Part 2, including that number hereems terest in any of the following items?		\$17,873.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
	I No I Yes. De	escribe				
		u u	tensils, pots/p	dresser, dishwasher, microwave, wash ans, table/chairs, sofa, loveseat, mower efrigerator, stove, misc. household god	r,	\$2,500.00
E	lectronics Examples: No Yes. De	Televisions and r including cell pho		eo, stereo, and digital equipment; computers, pr nedia players, games	rinters, scanners; music	collections; electronic devices
E			urines; paintings, , memorabilia, co	prints, or other artwork; books, pictures, or othe llectibles	r art objects; stamp, coir	n, or baseball card collections;
	■ No] Yes. De	escribe				
E		musical instrume	phic, exercise, an	nd other hobby equipment; bicycles, pool tables,	, golf clubs, skis; canoes	and kayaks; carpentry tools;
	Firearms Examples No Yes. De		notguns, ammuni	tion, and related equipment		

19-12844-aih Doc 1 FILED 05/08/19 ENTERED 05/08/19 16:25:56 Page 13 of 68

page 2

Best Case Bankruptcy

Schedule A/B: Property

Official Form 106A/B

Debtor 1 Latonya D.	Hayes	Case number (if known)	
11. Clothes			
	clothes, furs, leather coats, de	esigner wear, shoes, accessories	
□ No			
Yes. Describe			
	Clothing		\$1,000.00
12. Jewelry			
	ewelry, costume jewelry, eng	agement rings, wedding rings, heirloom jewelry, watches, gems,	gold, silver
□ No			
Yes. Describe			
	Earrings, watches, m	isc. costume jewelry	\$250.00
13. Non-farm animals			
Examples: Dogs, cats	, birds, horses		
□ No			
Yes. Describe			
	D		\$0.00
	Dog		\$0.00
14. Any other personal a	nd household items you di	d not already list, including any health aids you did not list	
■ No			
☐ Yes. Give specific in	formation		
15 Add the deller velve	of all of value autrica from	Dout 2 including any entries for page you have attached	
		Part 3, including any entries for pages you have attached	\$3,750.00
TOT I GIT OF TIME LIGHT			
Part 4: Describe Your Final			
Do you own or have any	legal or equitable interest	in any of the following?	Current value of the
			portion you own? Do not deduct secured
			claims or exemptions.
40.0.1			
16. Cash Examples: Money you	have in your wallet in your l	home, in a safe deposit box, and on hand when you file your petit	ion
□ No	Thave in your wanet, in your	nome, in a sale deposit sox, and on hand when you me your pour	1011
— 163			
		Cash	\$152.00
17. Deposits of money	savings or other financial ac	counts; certificates of deposit; shares in credit unions, brokerage	houses and other similar
		its with the same institution, list each.	riouses, and other similar
□ No	,	,	
■ Yes		Institution name:	
	17.1. Checking	Huntington Bank	\$0.15
	17.11. Offecking		
		Liminaton Bonk	\$0.00
	17.2. Savings	Huntington Bank	\$0.00
	, or publicly traded stocks		
		prokerage firms, money market accounts	
■ No			
☐ Yes	Institution or issue	er name:	
Official Form 106A/B		Schedule A/B: Property	page 3

19-12844-aih Doc 1 FILED 05/08/19 ENTERED 05/08/19 16:25:56 Page 14 of 68

De	ebtor 1	Latonya D. Hayes		Case number (if known)
19.	joint v	ublicly traded stock and interests in indenture	corporated and unincorporated business	es, including an interest in an LLC, partnership, and
	■ No			
	☐ Yes.	Give specific information about them Name of entity:		% of ownership:
20.	Negoti	<i>iable instrument</i> s include personal checks	negotiable and non-negotiable instrumer s, cashiers' checks, promissory notes, and n ot transfer to someone by signing or deliver	noney orders.
	☐ Yes.	Give specific information about them Issuer name:		
21.		nent or pension accounts ples: Interests in IRA, ERISA, Keogh, 401	(k), 403(b), thrift savings accounts, or other	pension or profit-sharing plans
	Yes.	List each account separately. Type of account:	Institution name:	
		401k	John Hancock	\$15,449.61
		401k	DiBella's	\$203.40
22.	Your s Examp		de so that you may continue service or use rent, public utilities (electric, gas, water), tele	
	■ No		Institution name or individual:	
23.			money to you, either for life or for a number	of years)
	■ No □ Yes	Issuer name and description	on.	
24.	26 U.S.	ts in an education IRA, in an account ir C. §§ 530(b)(1), 529A(b), and 529(b)(1).	n a qualified ABLE program, or under a q	ualified state tuition program.
	■ No □ Yes	Institution name and descr	iption. Separately file the records of any inte	erests.11 U.S.C. § 521(c):
25.	Trusts	, equitable or future interests in proper	ty (other than anything listed in line 1), a	nd rights or powers exercisable for your benefit
	☐ Yes.	Give specific information about them		
26.	Examp ■ No	s, copyrights, trademarks, trade secret oles: Internet domain names, websites, pr Give specific information about them	s, and other intellectual property occeds from royalties and licensing agreem	ents
27.	Licens Examp ■ No	es, franchises, and other general intan	gibles cooperative association holdings, liquor lice	nses, professional licenses
M	oney or	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to you		
	_	Give specific information about them, incl	luding whether you already filed the returns	and the tax years

De	ebtor 1	Latonya D. Hayes	Case number (if known)	
29.		support ples: Past due or lump sum alim	ony, spousal support, child support, maintenance, divorce settlement, property s	settlement
	■ No □ Yes.	Give specific information		
30.		amounts someone owes you oles: Unpaid wages, disability in benefits; unpaid loans you	surance payments, disability benefits, sick pay, vacation pay, workers' compensed to someone else	sation, Social Security
		Give specific information		
		•	Unclaimed Funds from Progressive Casualty Insurance Corp.	\$4.70
31.		ets in insurance policies oles: Health, disability, or life ins	urance; health savings account (HSA); credit, homeowner's, or renter's insurance	ce
	☐ Yes.	Name the insurance company of	of each policy and list its value.	
		Company		Surrender or refund value:
32.	If you a		you from someone who has died st, expect proceeds from a life insurance policy, or are currently entitled to recei	ve property because
		Give specific information		
33.			r or not you have filed a lawsuit or made a demand for payment putes, insurance claims, or rights to sue	
	☐ Yes.	Describe each claim		
34.	Other o	contingent and unliquidated c	laims of every nature, including counterclaims of the debtor and rights to	set off claims
	_	Describe each claim		
35.	_ ′	nancial assets you did not alre	eady list	
	■ No □ Yes.	Give specific information		
36		-	entries from Part 4, including any entries for pages you have attached	\$15,809.86
Pa	rt 5: De	scribe Any Business-Related Prop	perty You Own or Have an Interest In. List any real estate in Part 1.	
37.	Do you o	own or have any legal or equitable	e interest in any business-related property?	
ı	No. Go	to Part 6.		
I	☐ Yes. G	Go to line 38.		
Pa		scribe Any Farm- and Commercia ou own or have an interest in farmla	I Fishing-Related Property You Own or Have an Interest In. nd, list it in Part 1.	
46.	Do you	ı own or have any legal or equ	uitable interest in any farm- or commercial fishing-related property?	
	■ No.	Go to Part 7.		
	☐ Yes	. Go to line 47.		
Da	rt 7:	Describe All Branarty Vay Own	or Have an Interest in That You Did Not List Above	

Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2	Debtor 1 Latonya D. Hayes		Case number (if known)	
□ Yes. Give specific information	Examples: Season tickets, country club membership	st?		
List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2				
Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2	☐ Yes. Give specific information			
\$118 55. Part 1: Total real estate, line 2	54. Add the dollar value of all of your entries from Part 7. Write	that number here		\$0.00
56. Part 2: Total vehicles, line 5 57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36 59. Part 5: Total business-related property, line 45 60. Part 6: Total farm- and fishing-related property, line 52 61. Part 7: Total other property not listed, line 54 62. Total personal property. Add lines 56 through 61 \$17,873.00 \$3,750.00 \$15,809.86 \$0.00 \$0.00 \$0.00 \$0.00 \$30.00 \$0.00	Part 8: List the Totals of Each Part of this Form			
57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36 59. Part 5: Total business-related property, line 45 60. Part 6: Total farm- and fishing-related property, line 52 61. Part 7: Total other property not listed, line 54 62. Total personal property. Add lines 56 through 61 53,750.00 \$15,809.86 \$0.00 \$0.	55. Part 1: Total real estate, line 2			\$118,700.00
58. Part 4: Total financial assets, line 36 59. Part 5: Total business-related property, line 45 60. Part 6: Total farm- and fishing-related property, line 52 61. Part 7: Total other property not listed, line 54 62. Total personal property. Add lines 56 through 61 \$37,432.86 \$15,809.86 \$0.00 \$0.	56. Part 2: Total vehicles, line 5	\$17,873.00		
59. Part 5: Total business-related property, line 45 60. Part 6: Total farm- and fishing-related property, line 52 61. Part 7: Total other property not listed, line 54 62. Total personal property. Add lines 56 through 61 \$37,432.86 Copy personal property total	57. Part 3: Total personal and household items, line 15	\$3,750.00		
60. Part 6: Total farm- and fishing-related property, line 52 61. Part 7: Total other property not listed, line 54 62. Total personal property. Add lines 56 through 61 \$37,432.86 Copy personal property total	58. Part 4: Total financial assets, line 36	\$15,809.86		
61. Part 7: Total other property not listed, line 54 + \$0.00 62. Total personal property. Add lines 56 through 61 \$37,432.86 Copy personal property total \$3	59. Part 5: Total business-related property, line 45	\$0.00		
62. Total personal property. Add lines 56 through 61 \$37,432.86 Copy personal property total \$3	60. Part 6: Total farm- and fishing-related property, line 52	\$0.00		
	61. Part 7: Total other property not listed, line 54	+ \$0.00		
63. Total of all property on Schedule A/B. Add line 55 + line 62 \$156,1	62. Total personal property. Add lines 56 through 61	\$37,432.86	Copy personal property total	\$37,432.86
	63. Total of all property on Schedule A/B . Add line 55 + line 62		_	\$156,132.86

Total Consideration: \$ 124,900.00

Conv. Fee Paid: \$ 499.60

Total Value: 78,600 Arms Length Sale: UNKNW Rcpt: J-04222016-13

Transfer Fee Paid: \$ 0.50

Fee Paid by: Mount Morris Title Agency Inst #: 748684

Exempt Code:

Check #: 3688

Cuyahoga County Fiscal Officer

KNOW ALL MEN BY THESE PRESENTS

That

CASPER ENTERPRISE GROUP, INC.

the Grantor

Prior Deed Reference File No. 2015/12020279

For valuable Consideration paid, grants, with limited warranty covenants, to

LaTonya Hayes, unmarried

the Grantee

whose Tax Mailing Address will be: 20551 Trebec Avenue, Euclid, Ohio 44119

the following described premises:

Situated in the City of Euclid, County of Cuyahoga, and State of Ohio, and known as being Subtot No. 13 in Trebec Estates Subdivision of part of Original Euclid Township Lot No. 15, Tract No. 19, as shown by the recorded platin Volume 175 of Maps, Page 1/5 of Cuyahoga County Records, and being 50 feet front on the Northerly side of Trebec Avenue and extending back of equal width, 101.45 feet, as appears by said plat, be the same more or less, but subject to all legal highways. Aka 20551 Trebec Avenue, Euclid, Ohio 44419 PPN 641-21-100

The property conveyed is subject to all encumbrances, restrictions, easement, taxes and assessments of record.

IN WITNESS WHEREOF we have hereunto set our hands the

CASPER ENTERPRISE GROUP, INC.

Ninette S. Murzyn, President of Casper Enterprise Group, Inc.

State of Ohio

County of Cuyahoga

BEFORE ME, a notary public in and for said State and County, personally appeared the above named Ninette S. Murzyn, President of Casper Enterprises Group, Inc. that they did sign the foregoing instruments and that the same is the free act and deed of them personally.

Prepared by James Self

Notary Publi

MT MORKIS 2016-20818

Debtor 1	Latonya D. Ha	yes		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
Case number _				☐ Check if this is a

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

· ait ii	 , and in openty	Tou Glaini ao Exon	.p.	

	Clothing	\$1,000,00		\$1,000,00	Ohio Rev. Code Ann. §
	pots/pans, table/chairs, sofa, loveseat, mower, beds/bedding, refrigerator, stove, misc. household goods Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
	TV, DVD player, dresser, dishwasher, microwave, washer, dryer, utensils,	\$2,500.00		\$2,500.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
				100% of fair market value, up to any applicable statutory limit	
	2015 Dodge Charger 58,000 miles Line from Schedule A/B: 3.1	\$17,873.00		\$4,000.00	Ohio Rev. Code Ann. § 2329.66(A)(2)
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	2020.00(1)(1)
	20551 Trebec Blvd. Cleveland, OH 44119 Cuyahoga County	\$118,700.00		\$145,425.00	Ohio Rev. Code Ann. § 2329.66(A)(1)
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.	
	☐ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)			
	■ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	our spouse is filing with you.	
Pa	Identify the Property You Claim as E	xempt			
	,				

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Best Case Bankruptcy

2329.66(A)(4)(a)

Line from Schedule A/B: 11.1

100% of fair market value, up to any applicable statutory limit

De	ebtor 1 Latonya D. Hayes			Case number (if known)			
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption		
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.			
	Earrings, watches, misc. costume jewelry	\$250.00		\$250.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)		
	Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit			
	Cash Line from Schedule A/B: 16.1	\$152.00		\$152.00	Ohio Rev. Code Ann. § 2329.66(A)(3)		
	Line Horr Scredule AVB. 10.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(0)		
	Checking: Huntington Bank Line from Schedule A/B: 17.1	\$0.15		\$0.15	Ohio Rev. Code Ann. § 2329.66(A)(3)		
	Elle Hoff Genedale PAB. 17.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(0)		
	401k: John Hancock Line from Schedule A/B: 21.1	\$15,449.61		\$15,449.61	Ohio Rev. Code Ann. § 2329.66(A)(17)		
	Line Hotti Scredule AVB. 21.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(11)		
	401k: DiBella's Line from Schedule A/B: 21.2	\$203.40		\$203.40	Ohio Rev. Code Ann. § 2329.66(A)(17)		
	Line from Goriodale 772. 2112			100% of fair market value, up to any applicable statutory limit	2020100(1)(11)		
	Unclaimed Funds from Progressive Casualty Insurance Corp.	\$4.70		\$4.70	Ohio Rev. Code Ann. § 2329.66(A)(18)		
	Line from Schedule A/B: 30.1			100% of fair market value, up to any applicable statutory limit	2020100(11)(10)		
3.	Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)						
	■ No						
	☐ Yes. Did you acquire the property covere	ed by the exemption wi	ithin 1	,215 days before you filed this case	?		
	□ No						
	☐ Yes						

Fill in this informa	ation to identify you	r case:			
Debtor 1	Latonya D. Haye	es			
	First Name	Middle Name Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Name			
United States Bank	cruptcy Court for the:	NORTHERN DISTRICT OF OHIO			
Case number					if this is an led filing
Official Form	106D				
Schedule [D: Creditors	Who Have Claims Secure	ed by Propert	у	12/15
is needed, copy the A number (if known).		f two married people are filing together, both are early, number the entries, and attach it to this form.			
_ `	_	his form to the court with your other schedules.	Vou have nothing also t	a rapart on this form	
_		·	Tou have nothing else to	o report on this form.	
Yes. Fill in a	all of the information b	pelow.			
Part 1: List All	Secured Claims		0-1	O-lime D	Column C
for each claim. If mor	e than one creditor has	nore than one secured claim, list the creditor separate a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.		Column B Value of collateral that supports this claim	Unsecured portion If any
2.1 #1-Stonega	te Mortgage	Describe the property that secures the claim:	\$118,000.00	\$118,700.00	\$0.00
Creditor's Name		20551 Trebec Blvd. Cleveland, OH 44119 Cuyahoga County			
PO Box 790 Saint Louis		As of the date you file, the claim is: Check all that apply. ☐ Contingent			
Number, Street, C	city, State & Zip Code	Unliquidated			
Who owes the debt	t? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only ■ Debtor 2 only		■ An agreement you made (such as mortgage or s car loan)	ecured		
☐ Debtor 1 and Debt	tor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the	debtors and another	☐ Judgment lien from a lawsuit			
Check if this clair		Other (including a right to offset)			

_

Date debt was incurred 2016

Last 4 digits of account number

5866

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

Debtor 1 Latonya D. Hayes		Case number (if known)		
First Name Middle	Name Last Name	(in initially		
2.2 #2-City of Cleveland Heights	Describe the property that secures the claim:	\$5,377.25	\$118,700.00	\$4,677.25
Creditor's Name	20551 Trebec Blvd. Cleveland, OH 44119 Cuyahoga County			
c/o RITA 40 Severance Circle Cleveland, OH 44118	As of the date you file, the claim is: Check all that apply.			
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or s car loan)	ecured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred 2018	Last 4 digits of account number 4541			
2.3 First Investors	Describe the property that secures the claim:	\$21,913.24	\$17,873.00	\$4,040.24
Creditor's Name	2015 Dodge Charger 58,000 miles			
380 Interstate North Pkwy., 3rd Fl. Atlanta, GA 30339	As of the date you file, the claim is: Check all that apply.			
Pkwy., 3rd Fl.				
Pkwy., 3rd Fl. Atlanta, GA 30339	apply. Contingent			
Pkwy., 3rd Fl. Atlanta, GA 30339 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only	apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or s	ecured		
Pkwy., 3rd Fl. Atlanta, GA 30339 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only	apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or s car loan)	ecured		
Pkwy., 3rd Fl. Atlanta, GA 30339 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only	apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or s car loan) Statutory lien (such as tax lien, mechanic's lien)	ecured		
Pkwy., 3rd Fl. Atlanta, GA 30339 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or s car loan) Statutory lien (such as tax lien, mechanic's lien)	ecured		
Pkwy., 3rd Fl. Atlanta, GA 30339 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or s car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit			
Pkwy., 3rd Fl. Atlanta, GA 30339 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or s car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)			
Pkwy., 3rd FI. Atlanta, GA 30339 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred Add the dollar value of your entries in	apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or s car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)		.49	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 2

Fill ir	n this informatio	n to identify your o	case:						
Debte	or 1 L:	atonya D. Hayes							
		st Name	Middle Name	Last Nam)	-			
Debte		st Name	Middle Name	Last Nam					
(Spous	se ii, iiiiig) i ii	st Name			7				
Unite	ed States Bankrup	tcy Court for the:	NORTHERN DIS	STRICT OF OHIO					
Case	number								
(if knov	wn)		<u> </u>				_	if this is an	n
] ameno	ded filing	
Offic	cial Form 10)6E/F							
			ho Have Un	secured Claim	S			12/1	5
Sched Sched left. At	ule G: Executory C ule D: Creditors W ttach the Continua and case number (Contracts and Unexp ho Have Claims Section Page to this pag	ired Leases (Official ured by Property. If e. If you have no inf	a claim. Also list executo Form 106G). Do not inclumore space is needed, co ormation to report in a Pa	de any cre py the Part	ditors with partially s you need, fill it out,	secured claims that number the entries	are listed in in the boxes	n s on the
		ve priority unsecured		1?					
_	No. Go to Part 2.	To pricing anocoure	a cramic agamer ye.	••					
	Yes.								
p P	ossible, list the clain art 1. If more than o	ns in alphabetical orde ne creditor holds a pa	r according to the cre rticular claim, list the	npriority amounts, list that or ditor's name. If you have mother creditors in Part 3. r this form in the instruction	ore than tw				ge of
2.1	RITA		Last 4	digits of account number	4541	\$5,377.25	\$5,377.25	j	\$0.00
	Priority Creditor's PO Box 470		When v	vas the debt incurred?					
		Heights, OH 441					_		
		City State Zip Code		ne date you file, the claim	is: Check a	II that apply			
	Who incurred the	debt? Check one.	☐ Con	tingent					
	■ Debtor 1 only		☐ Unli	quidated					
	Debtor 2 only		☐ Disp	outed					
	☐ Debtor 1 and De	ebtor 2 only	Type o	f PRIORITY unsecured cla	im:				
	☐ At least one of the	ne debtors and anothe	r 🗖 Don	nestic support obligations					
	☐ Check if this cl	aim is for a commun	ity debt Tax	es and certain other debts y	ou owe the	government			
	ls the claim subjec	t to offset?	☐ Clai	ms for death or personal inj	ury while yo	u were intoxicated			
	No		☐ Oth	er. Specify					
	☐ Yes			Income Ta	x				
Part	2: List All of \	our NONPRIORIT	Y Unsecured Clai	ms					
3. D		ve nonpriority unsec							
_	-		_	o the court with your other	schedules.				
	Yes.								
u th	nsecured claim, list	the creditor separately	for each claim. For e	cical order of the creditor each claim listed, identify which in Part 3.If you have more to	at type of c	laim it is. Do not list cl	aims already included	l in Part 1. If	

Total claim

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 15

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

34886

Best Case Bankruptcy

Latonya D. Hayes	Case number (if known)	
Amazon	Last 4 digits of account number 8468	\$1,773.0
Nonpriority Creditor's Name PO Box 960013	When was the debt incurred? 2013-2018	
Orlando, FL 32869-0013	2010 2010	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did report as priority claims	not
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐Yes	Other. Specify Credit Card Purchases	
American Express	Last 4 digits of account number 1000	\$1,864.0
Nonpriority Creditor's Name PO Box 1270	When was the debt incurred? 2017-2018	
Newark, NJ 07101		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	☐ Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
☐ Check if this claim is for a community		
s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did report as priority claims	101
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐Yes	■ Other. Specify Credit Card Purchases	
Capital One	Last 4 digits of account number 4124	\$3,564.0
Nonpriority Creditor's Name		
Attn: Bankruptcy Department PO Box 30285	When was the debt incurred? 2008-2018	
Salt Lake City, UT 84130-0285		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did report as priority claims	not
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
— 110	■ Other. Specify Credit Card Purchases	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 15

r 1 Latonya D. Hayes		Case number (if known)	
Capital One	Last 4 digits of account number	4570	\$1,218.7
Nonpriority Creditor's Name Attn: Bankruptcy Department PO Box 30285	When was the debt incurred?	2006-2018	
Salt Lake City, UT 84130-0285 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing		
Yes	■ Other. Specify Credit Card	d Purchases	
Chase	Last 4 digits of account number	5795	\$1,092.0
Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 15298	When was the debt incurred?	2016-2018	
Wilmington, DE 19850-5298 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	■ Other. Specify Credit Card		
Citi Card	Last 4 digits of account number	5322	\$1,912.6
Nonpriority Creditor's Name			Ψ1,012.
Attn: Bankruptcy Dept. PO Box 6062	When was the debt incurred?	2016-2018	
Sioux Falls, SD 57117			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing		
☐ Yes	■ Other. Specify Credit Card	d Purchases	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 15

Latonya D. Hayes	Case number (if known)	
Citi Card	Last 4 digits of account number	\$0.0
Nonpriority Creditor's Name c/o Radius Global Solutions PO Box 390905	When was the debt incurred?	
Minneapolis, MN 55439 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify NOTICE ONLY	
Citibank/Home Depot Nonpriority Creditor's Name	Last 4 digits of account number 6583	\$2,640.6
PO Box 790034 Saint Louis, MO 63179-0034	When was the debt incurred? 2016-2018	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Credit Card Purchases	
Citibank/Home Depot	Last 4 digits of account number	\$0.0
Nonpriority Creditor's Name c/o Radius Global Solutions	When was the debt incurred?	
PO Box 390905 Minneapolis, MN 55439		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify NOTICE ONLY	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 4 of 15

Best Case Bankruptcy

1 Latonya D. Hayes	Case number (if known)	
City of Cleveland Heights	Last 4 digits of account number	\$0.0
Nonpriority Creditor's Name c/o Atty. Cliff Babcock 30455 Solon Road	When was the debt incurred?	
Solon, OH 44139 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify NOTICE ONLY	
Cleveland Clinic	Last 4 digits of account number 5122	\$905.
Nonpriority Creditor's Name PO Box 89410	When was the debt incurred? 2013	
Cleveland, OH 44101 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
_	Пол	
Debtor 1 only	☐ Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical Bill	
Cleveland Clinic	Last 4 digits of account number	\$0.
Nonpriority Creditor's Name c/o Phoenix Financial Services PO Box 361450	When was the debt incurred?	•
Indianapolis, IN 46236 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify NOTICE ONLY	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 5 of 15

Cleveland Clinic Physicians	Last 4 digits of account number	7276	\$130.0
Nonpriority Creditor's Name PO Box 89410 Cleveland, OH 44101	When was the debt incurred?	2013-2016	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
☐ At least one of the debtors and another☐ Check if this claim is for a community	☐ Student loans	d dann.	
Lebt s the claim subject to offset?	_	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Medical Bil		
Cleveland Clinic Physicians	Last 4 digits of account number		\$0.0
Nonpriority Creditor's Name	Last 4 digits of account number		V 0.0
c/o First Federal Credit Control 24700 Chagrin Blvd., Suite 205 Beachwood, OH 44122	When was the debt incurred?		
Number Street City State Zip Code Nho incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify NOTICE ON	NLY	
Cleveland Clinic/Hillcrest Hospital	Last 4 digits of account number	3392	\$1,641.9
Nonpriority Creditor's Name PO Box 89410	When was the debt incurred?	2013-2016	
Cleveland, OH 44101 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	no or the date you me, the olding	oneok all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	 Obligations arising out of a separe report as priority claims 	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Medical Bil	I	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 6 of 15

Cleveland Clinic/Hillcrest Hospital	Last 4 digits of account number	\$0.0
Nonpriority Creditor's Name c/o First Federal Credit Control 24700 Chagrin Blvd., Suite 205	When was the debt incurred?	
Beachwood, OH 44122 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify NOTICE ONLY	
Cleveland Clinic/Hillcrest Hospital	Last 4 digits of account number	\$0.00
Nonpriority Creditor's Name c/o JP Recovery Services PO Box 16749	When was the debt incurred?	
Rocky River, OH 44116 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify NOTICE ONLY	
Comenity Bank/Giant Eagle	Last 4 digits of account number 2624	\$1,044.00
Nonpriority Creditor's Name	Last 4 digits of account number	Ψ1,044.00
Bankruptcy Dept. PO Box 182125	When was the debt incurred? 2016-2018	
Columbus, OH 43218-2125 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other Specify Credit Card Purchases	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 7 of 15

Comenity Bank/HSN	Last 4 digits of account number	1691	\$1,077.00
Nonpriority Creditor's Name Bankruptcy Dept.	When was the debt incurred?	2014-2018	
PO Box 182125	When was the dest mounted:	2014-2010	
Columbus, OH 43218-2125	_		
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans		
Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Credit Card	d Purchases	
Comenity Bank/Wayfair	Last 4 digits of account number	8850	\$1,610.00
Nonpriority Creditor's Name Bankruptcy Dept.	When was the debt incurred?	2016-2018	
PO Box 182125	when was the dept incurred:	2010-2018	
Columbus, OH 43218-2125			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Card	d Purchases	
Credit First Nonpriority Creditor's Name	Last 4 digits of account number	0500	\$1,121.00
PO Box 81344	When was the debt incurred?	2017-2018	
Cleveland, OH 44188-0344 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	7.5 0 4 , 6	or chook an anat appry	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	☐ Debts to pension or profit-sharin		
□Yes	■ Other. Specify Credit Card	l Purchases	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 8 of 15

Credit One	Last 4 digits of account number	7135	\$2,761.0
Nonpriority Creditor's Name PO Box 60500	When was the debt incurred?	2015-2018	
City Of Industry, CA 91716 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	■ Other. Specify Credit Card	I Purchases	
Discover	Last 4 digits of account number	5745	\$10,121.0
Nonpriority Creditor's Name	_		
PO Box 6103	When was the debt incurred?	2016-2018	
Carol Stream, IL 60197-6103 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	,	an anat app.,	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
☐Yes	Other. Specify Credit Card	l Purchases	
Discover	Local Addicate of account number		\$0.0
Nonpriority Creditor's Name	Last 4 digits of account number When was the debt incurred?		Ψοισ
PO Box 390846 Minneapolis, MN 55439			
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
		VI ,	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 9 of 15

Emergency Professional Services	Last 4 digits of account number	\$0.0
Nonpriority Creditor's Name c/o Account Resolution Services 1643 N. Harrison Pkwy. Bldg. H Fort Lauderdale, FL 33323	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify NOTICE ONLY	
Emergency Professional Services	Last 4 digits of account number 0091	\$234.0
Nonpriority Creditor's Name	Last 4 digits of account number	V 20
PO Box 740021 Cincinnati, OH 45274	When was the debt incurred? 2015	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical Bill	
Enhanced Recovery Corp	Last 4 digits of account number 2935	\$94.0
Nonpriority Creditor's Name		ψυτικ
8014 Bayberry Rd Jacksonville, FL 32256	When was the debt incurred? 2016	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit Advanced	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 10 of 15

Hillcrest Hospital	Last 4 digits of account number		\$0.00
Nonpriority Creditor's Name c/o Phoenix Financial Services PO Box 361450	When was the debt incurred?		
ndianapolis, IN 46236		: OL	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans ☐ Obligations arising out of a sena	aration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	and the control of divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify NOTICE ON	NLY	
JC Penney/Synchrony Bank	Last 4 digits of account number	0889	\$505.00
Nonpriority Creditor's Name			• • • • • • • • • • • • • • • • • • • •
Bankruptcy Department PO Box 103104 Roswell, GA 30076	When was the debt incurred?	2008-2018	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Card	d Purchases	
_ending Club	Last 4 digits of account number	5453	\$1,021.55
Nonpriority Creditor's Name 71 Stevenson Street, Suite 300 San Francisco, CA 94105	When was the debt incurred?	2017	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
		oan	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 11 of 15

Best Case Bankruptcy

1 Latonya D. Hayes		Case number (if known)				
Lending Club	Last 4 digits of account number	\$0.00				
Nonpriority Creditor's Name c/o CKS Financial	When was the debt incurred?					
PO Box 2856 Chesapeake, VA 23327 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
Who incurred the debt? Check one.						
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
At least one of the debtors and another	Type of NONPRIORITY unsecured					
Check if this claim is for a community		Student loans				
lebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
No	Debts to pension or profit-sharing					
Yes	Other. Specify NOTICE ON					
Paypal Credit	Last 4 digits of account number	0211	\$9,248.2			
Nonpriority Creditor's Name O Box 71202 Charlotte, NC 28272-1202	When was the debt incurred?	2016-2018				
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim					
■ Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims					
No	Debts to pension or profit-sharing	ng plans, and other similar debts				
Yes	Other. Specify Credit Card	d Purchases				
Paypal Extra	Last 4 digits of account number	8901	\$3,164.0			
Nonpriority Creditor's Name PO Box 105658 Atlanta, GA 30348	When was the debt incurred?	2017-2018				
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
■ Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure					
☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa					
Is the claim subject to offset?	report as priority claims					
No No	☐ Debts to pension or profit-sharing plans, and other similar debts					
Yes	■ Other. Specify Credit Card Purchases					

Schedule E/F: Creditors Who Have Unsecured Claims

Page 12 of 15

Best Case Bankruptcy

PNC Bank	Last 4 digits of account number 4425	\$3,330.0			
Nonpriority Creditor's Name PO Box 856177	When was the debt incurred? 2017-2018				
Louisville, KY 40285 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
No	\square Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	■ Other. Specify Credit Card Purchases				
qvc	Last 4 digits of account number 3167	\$1,360.0			
Nonpriority Creditor's Name					
PO Box 2254 West Chester, PA 19380	When was the debt incurred? 2015-2018				
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
No	\square Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	■ Other. Specify Credit Card Purchases				
University Hospital	Last 4 digits of account number 1723	Unknow			
Nonpriority Creditor's Name Attn: #8792M	When was the debt incurred? 2018				
PO Box 14000 Belfast, ME 04915					
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	□ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
No	☐ Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	■ Other. Specify Medical Bill				

Schedule E/F: Creditors Who Have Unsecured Claims

Page 13 of 15

Debtor	1 Latonya	D. Hayes	Case number (if known)					
4.3	Wal-Mart		Last 4 digits of account number	2844		\$1,542.00		
	Nonpriority Cre PO Box 530	0927	When was the debt incurred?	2015	-2018			
		City State Zip Code the debt? Check one.	As of the date you file, the claim	is: Check	c all that apply			
	■ Debtor 1 on	lv	☐ Contingent					
	Debtor 2 on	•	☐ Unliquidated					
		d Debtor 2 only	<u> </u>					
		•	☐ Disputed Type of NONPRIORITY unsecured claim:					
	_	of the debtors and another	Student loans					
	☐ Check if the	is claim is for a community	☐ Obligations arising out of a separation agreement or divorce that you did not					
		bject to offset?	report as priority claims					
	■ No		☐ Debts to pension or profit-sharing plans, and other similar debts					
	□Yes		Other. Specify Credit Card					
4.3	Wells Farge	<u> </u>	Last 4 digits of account number	4541		\$1,162.00		
8	Nonpriority Cre PO Box 660	ditor's Name	When was the debt incurred?			Ψ1,102.00		
	Dallas, TX		As of the date you file, the claim					
		the debt? Check one.	As of the date you file, the claim	is. Check	к ан тат арріу			
	■ Debtor 1 on		Пол					
	_	•	☐ Contingent					
	☐ Debtor 2 on	•	☐ Unliquidated					
	_	d Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:					
	☐ At least one of the debtors and another		Student loans					
	☐ Check if this claim is for a community debt		_	ration ac	grooment or diverse that you did not			
		bject to offset?	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 					
	No		Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes		■ Other. Specify Credit Card Purchases					
is tryi have notific	his page only if ing to collect from more than one ded for any debts	om you for a debt you owe to son creditor for any of the debts that in Parts 1 or 2, do not fill out or mounts for Each Type of Uns	out your bankruptcy, for a debt that y neone else, list the original creditor in you listed in Parts 1 or 2, list the addi submit this page.	Parts 1 itional cr	or 2, then list the collection agency heditors here. If you do not have addit	nere. Similarly, if you it is		
	tne amounts of of unsecured cla		ns. This information is for statistical r	eporting	purposes only. 28 U.S.C. §159. Add t	tne amounts for each		
					Total Claim			
	6a. Total	Domestic support obligations		6a.	\$0.00_			
from F	laims Part 1 6b.	Taxes and certain other debts	you owe the government	6b.	\$ 5,377.25			
	6c.	Claims for death or personal in	jury while you were intoxicated	6c.	\$ 0.00			
	6d.	Other. Add all other priority unse	cured claims. Write that amount here.	6d.	\$ 0.00			
	6e.	Total Priority. Add lines 6a throu	ugh 6d.	6e.	\$5,377.25			
					Total Claim			
	6f. Total	Student loans		6f.	\$			
cl from F	laims Part 2 6g.	Obligations arising out of a se you did not report as priority o	paration agreement or divorce that laims	6g.	\$ 0.00			

Schedule E/F: Creditors Who Have Unsecured Claims

Debts to pension or profit-sharing plans, and other similar debts

Page 14 of 15

0.00

- Other. Add all other nonpriority unsecured claims. Write that amount here.
- \$ 56,137.13

6j. Total Nonpriority. Add lines 6f through 6i.

6j. \$ **56,137.13**

Fill in this infor	mation to identify your	case:		
Debtor 1	Latonya D. Hayes	S		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO	
Case number _				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.3	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Best Case Bankruptcy

Fill in this	s information to identify you	r case:			
Debtor 1	Latonya D. Haye				
Dahtan 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	ling) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRIC	T OF OHIO		
Case num (if known)	nber				☐ Check if this is an amended filing
Officia	al Form 106H				
	dule H: Your Co	debtors			12/15
fill it out, a		e boxes on the left. Attac n). Answer every question	h the Additional Page to n.	o this page. On the top	eeded, copy the Additional Page, of any Additional Pages, write
■ No)		·		
Arizo	thin the last 8 years, have yona, California, Idaho, Louisian o. Go to line 3. es. Did your spouse, former sp	a, Nevada, New Mexico, P	uerto Rico, Texas, Washi		states and territories include
in lin Form	e 2 again as a codebtor only 1 106D), Schedule E/F (Offici Column 2.	if that person is a guara	ntor or cosigner. Make :	sure you have listed th 6G). Use Schedule D, S	with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and	ZIP Code		Column 2: The cred Check all schedules	ditor to whom you owe the debt state that apply:
3.1	Name			_ ☐ Schedule D, line☐ Schedule E/F, line☐ Schedule G, line	ne
	Number Street City	State	ZIP Code	_	
3.2	Name			☐ Schedule D, line☐ Schedule E/F, line☐ Schedule G, line	ne
	Number Street City	State	ZIP Code	_	

Schedule H: Your Codebtors

Fill	in this information to identify yo	ur case.								
	, , , , , , , , , , , , , , , , , , ,	D. Hayes								
	otor 2 puse, if filing)				_					
Uni	ted States Bankruptcy Court fo	r the: NORTHERN DISTRIC	CT OF OHIO							
	se number nown)		-			Check if this is: An amende A supplement	d filing ent showir			
\bigcirc	fficial Form 106I							following date:		
	chedule I: Your II	ncome				MM / DD/ Y	YYY		12/15	
sup spo atta	as complete and accurate as plying correct information. If use. If you are separated and ch a separate sheet to this fo the complex to the co	you are married and not fili your spouse is not filing w rm. On the top of any additi	ng jointly, and your ith you, do not inclu	spouse de infor	is liv matic	ing with you, inclo on about your spo	ude infor ouse. If m	mation about ore space is	your needed,	
1.	Fill in your employment information.		Debtor 1	Debtor 1				Debtor 2 or non-filing spouse		
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Employed □ Not employed			☐ Emplo	•			
		Occupation	Store Manager				, .,			
	Include part-time, seasonal, o self-employed work.	•	Di'Bella's							
	Occupation may include stud or homemaker, if it applies.	ent Employer's address	180 Canal View 600 Rochester, NY		Suite)				
		How long employed t	here? 3 mont	hs						
Par	t 2: Give Details About	Monthly Income								
	mate monthly income as of thuse unless you are separated.	ne date you file this form. If	you have nothing to r	eport for	any	ine, write \$0 in the	space. In	ıclude your noı	n-filing	
	ou or your non-filing spouse hav e space, attach a separate she		ombine the informatio	n for all	emplo	oyers for that perso	n on the I	lines below. If	you need	
						For Debtor 1		ebtor 2 or ling spouse		
2.	List monthly gross wages, deductions). If not paid mont			2.	\$	3,948.19	\$	N/A		
3.	Estimate and list monthly o	vertime pay.		3.	+\$	0.00	+\$	N/A		
4.	Calculate gross Income. Ad	dd line 2 + line 3.		4.	\$	3,948.19	\$	N/A		

Official Form 106l Schedule I: Your Income page 1

			For	Debtor 1		ebtor 2 or			
	Copy line 4 here	4.	2	3,948.19	\$	ling spouse N/A			
_	•	4.	Ψ_	3,940.19	Ψ	IV/A			
5.	List all payroll deductions:								
	5a. Tax, Medicare, and Social Security deductions	5a.	\$_	764.36	\$	N/A			
	5b. Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	N/A			
	5c. Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	N/A			
	5d. Required repayments of retirement fund loans	5d.	\$_	0.00	\$	N/A			
	5e. Insurance	5e.	\$	188.37	\$	N/A			
	5f. Domestic support obligations	5f.	\$_	0.00	\$	N/A_			
	5g. Union dues	5g.	\$_	0.00	\$	N/A			
	5h. Other deductions. Specify: Disability Insurance	5h.+	\$_	92.91 +	\$	N/A			
6.	Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	1,045.64	\$	N/A			
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	2,902.55	\$	N/A			
8.	List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$_	0.00	\$	N/A			
	8b. Interest and dividends	8b.	\$_	0.00	\$	N/A			
	 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental 	8c. 8d. 8e.	\$_ \$_ \$_	0.00 0.00 0.00	\$ \$ \$	N/A N/A N/A			
	Nutrition Assistance Program) or housing subsidies.	01	•		•				
	Specify:	8f.	\$_	0.00	\$	N/A			
	8g. Pension or retirement income	8g.	\$_	0.00	\$	N/A			
	8h. Other monthly income. Specify:	8h.+	\$_	0.00 +	\$	N/A			
9.	Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A			
10.	Calculate monthly income. Add line 7 + line 9.	0. \$		2,902.55 + \$		N/A = \$ 2,902.55			
	Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	· * .		2,002.00		2,002.00			
11.	1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00								
12.	Add the amount in the last column of line 10 to the amount in line 11. The result Write that amount on the Summary of Schedules and Statistical Summary of Certain applies					12. \$ 2,902.55			
13.	Do you expect an increase or decrease within the year after you file this form? No.					Combined monthly income			
	Yes. Explain: Debtor lost her previous job and began new empl therefore, Schedule I differs from Form 122A.	oyme	ent d	uring the previ	ous 6 ı	month period,			

Official Form 106l Schedule I: Your Income page 2

						•			
Fill in	n this informa	tion to identify yo	our case:						
Debte	or 1	Latonya D. H	laves			Ch	eck if this is	:	
								Ū	
Debto									ving postpetition chapter the following date:
(Spot	use, if filing)						то ехреп	ses as ui	the following date.
Unite	d States Bankr	uptcy Court for the	: NORTH	ERN DISTRICT OF OHI	0		MM / DD	/ YYYY	
Case	number								
(If kn	own)								
Of	ficial Fo	rm 106J							
Sc	hedule	J: Your I	Exper	ises					12/1
Be a infoi num	s complete a rmation. If m ber (if know	and accurate as ore space is ne n). Answer ever	possible eded, atta y questio	. If two married people a ch another sheet to this					
Part 1.	1: Descr	ibe Your House	hold						
١.	_								
	■ No. Go to		in a sonar	ate household?					
	□ res. Doe		п а зераг	ate nousenou:					
			st file Offici	al Form 106J-2, <i>Expense</i>	es for Separate House	ehold of De	ebtor 2.		
2.	Do you have	e dependents?	□ No						
	Do not list De Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Deper age	ndent's	Does dependent live with you?
	Do not state	the							□ No
	dependents	names.			Godson		21		Yes
									□ No
									☐ Yes
									□ No □ Yes
									□ Yes
									☐ Yes
3.	expenses of	enses include f people other to d your depende	han $_{m \sqcap}$	No Yes					00
expe appl	mate your ex enses as of a licable date.	date after the l	our bankr pankrupto	uptcy filing date unless	pplemental <i>Schedule</i>				pter 13 case to report f the form and fill in the
the v		n assistance and		cluded it on <i>Schedule I:</i>				Your expe	enses
4.		r home owners ad any rent for the		ses for your residence. r lot.	Include first mortgag		\$		1,242.00
	If not includ	ed in line 4:							
	4a. Real e	state taxes				4a.	\$		0.00
	4b. Proper	rty, homeowner's	s, or renter	's insurance		4b.	\$		0.00
				ıpkeep expenses		4c.			0.00
_		owner's associat		dominium dues		4d.	\$		0.00

Debtor 1	Latonya	a D. Hayes	Case num	ber (if known)	
s. Util i	ities:				
6a.		y, heat, natural gas	6a.	\$	165.00
6b.	Water, se	ewer, garbage collection	6b.	\$	30.00
6c.		ne, cell phone, Internet, satellite, and cable services	6c.	\$	140.00
6d.	Other. Sp	pecify:	6d.	\$	0.00
Foo		sekeeping supplies	7.	\$	325.00
		children's education costs	8.	·	0.00
		dry, and dry cleaning	9.	·	25.00
	•	products and services	10.		20.00
		ental expenses	11.		0.00
		Include gas, maintenance, bus or train fare.	• • • •	<u> </u>	0.00
		car payments.	12.	\$	100.00
		, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
		tributions and religious donations	14.	\$	0.00
	urance.	Č		·	
Doi	not include i	insurance deducted from your pay or included in lines 4 or 20.			
15a	. Life insur	rance	15a.	\$	0.00
15b	. Health in:	surance	15b.	\$	0.00
15c	. Vehicle ir	nsurance	15c.	\$	166.00
15d	. Other ins	surance. Specify:	15d.	\$	0.00
. Tax	es. Do not i	nclude taxes deducted from your pay or included in lines 4 or 20.			
Spe	cify:		16.	\$	0.00
		lease payments:			
17a	. Car paym	nents for Vehicle 1	17a.	\$	684.51
17b	. Car paym	nents for Vehicle 2	17b.	\$	0.00
17c	. Other. Sp	pecify:	17c.	\$	0.00
17d	. Other. Sp	pecify:	17d.	\$	0.00
		s of alimony, maintenance, and support that you did not report			0.00
ded	lucted from	your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106	SI). 18.		0.00
Oth	er payment	ts you make to support others who do not live with you.		\$	0.00
	cify:		19.		
		perty expenses not included in lines 4 or 5 of this form or on S			
		es on other property	20a.	·	0.00
	. Real esta		20b.	·	0.00
		homeowner's, or renter's insurance	20c.	·	0.00
		ance, repair, and upkeep expenses	20d.	·	0.00
20e	. Homeow	ner's association or condominium dues	20e.	\$	0.00
. Oth	er: Specify:		21.	+\$	0.00
Cal		manthly average			
	-	monthly expenses 4 through 21.		•	2 907 54
		<u> </u>	2	\$ *	2,897.51
		22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	-2	I	
22c.	. Add line 22	2a and 22b. The result is your monthly expenses.		\$	2,897.51
. Cal	culate vour	monthly net income.			
	•	e 12 (your combined monthly income) from Schedule I.	23a.	\$	2,902.55
		ur monthly expenses from line 22c above.	23b.		2,897.51
200	. <i>С</i> СРУ УОС		200.		
230	. Subtract	your monthly expenses from your monthly income.			
200.		It is your monthly net income.	23c.	\$	5.04
For e	example, do y	an increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect to terms of your mortgage?			or decrease because of a
I		[=			
	Yes.	Explain here:			

Fill in this infor	mation to identify your	case:			
Debtor 1	Latonya D. Haye	S			
	First Name	Middle Name	Last Name		
Debtor 2 Spouse if, filing)	First Name	Middle Name	Last Name		
Jnited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case number (if known)					☐ Check if this is an amended filing
Official Form Declarat	-	an Individual	Debtor's Sch	nedules	12/15
two married no	eonle are filing togethe	r hoth are equally respon	nsible for supplying correc	ct information	
two married pe	copie are ming togethe	i, both are equally respon	isible for supplying correc	ct imormation.	
btaining money		n connection with a bank			t, concealing property, or imprisonment for up to 20
Sign	n Below				
Did you pa	y or agree to pay some	eone who is NOT an attori	ney to help you fill out bar	nkruptcy forms?	
■ No					
☐ Yes. N	Name of person				cy Petition Preparer's Notice, Signature (Official Form 119)
	lity of perjury, I declare e true and correct.	that I have read the sumi	mary and schedules filed v	with this declaration an	d
X /s/ Late	onya D. Hayes		X		
Latony	/a D. Hayes re of Debtor 1		Signature of De	ebtor 2	
Date I	May 8, 2019		Date		

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Best Case Bankruptcy

Fill in this infor	mation to identify you	r case:			
Debtor 1	Latonya D. Haye	es			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT (OF OHIO		
	, ,				
Case number (if known)					Check if this is an
					amended filing
Official Fa	was 407				
Official Fo		Affairs for Individ	duals Eiling for B	ankruptov	4/1:
Be as complete information. If r	and accurate as poss	ible. If two married people a , attach a separate sheet to	are filing together, both are	equally responsible for sup y additional pages, write yo	plying correct
Part 1: Give	Details About Your Ma	arital Status and Where You	Lived Before		
1. What is you	ır current marital statı	us?			
☐ Marrie	d				
■ Not ma	arried				
2. During the	last 3 years, have you	lived anywhere other than	where you live now?		
□ No ■ Yes. Li	st all of the places you	lived in the last 3 years. Do no	ot include where you live now	<i>I</i> .	
Debtor 1 P	rior Address:	Dates Debtor 1	Debtor 2 Prior Ac	dress:	Dates Debtor 2
	t Derbyshire Road d Heights, OH 44118	From-To:	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
states and territo	<i>rie</i> s include Arizona, Ca		vada, New Mexico, Puerto R	ity property state or territor ico, Texas, Washington and V	
Part 2 Expla	in the Sources of You	ır Income			
Fill in the to	al amount of income yo	mployment or from operating user income that you received from all jobs and a have income that you received.	all businesses, including part		ndar years?
□ No					
Yes. F	III in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	l of current year until ed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$15,767.12	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
Official Form 107		Statement of Financial Aff	airs for Individuals Filing for B	ankruptcy	page '

19-12844-aih Doc 1 FILED 05/08/19 ENTERED 05/08/19 16:25:56 Page 45 of 68

Debtor 1 Latonya D. Hayes					Case number (if known)						
					Debtor 1		Debtor 2				
					Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc		Gross income (before deductions and exclusions)		
For last calendar year: (January 1 to December 31, 2018)		■ Wages, commissions, bonuses, tips	\$62,254.77	☐ Wages, com bonuses, tips	missions,						
					☐ Operating a business		Operating a	business			
For the calendar year before that: (January 1 to December 31, 2017)		■ Wages, commissions, bonuses, tips			☐ Wages, commissions, bonuses, tips						
					☐ Operating a business		☐ Operating a l	business			
	List e	ach s	,	the gross inco	se and you have income that yome from each source separate		,				
					Debtor 1		Debtor 2				
					Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of incorporation Describe below.		Gross income (before deductions and exclusions)		
Pa	rt 3:	List	Certain Pa	yments You	Made Before You Filed for I	Bankruptcy					
6.	_	ither No.	Neither De individual During the No. Yes	ebtor 1 nor E primarily for a 90 days befo Go to line 7 List below 6 paid that cr not include	P's debts primarily consumer Debtor 2 has primarily consumer personal, family, or household pre you filed for bankruptcy, discretion and creditor to whom you pailed to the payment sto an attorney for the ton 4/01/22 and every 3 years	Imer debts. Consumer debted purpose." d you pay any creditor a total d a total of \$6,825* or more into for domestic support obligations bankruptcy case.	I of \$6,825* or mor n one or more pay lations, such as ch	re? ments and tl ild support a	ne total amount you nd alimony. Also, do		
		Yes.			or both have primarily consure you filed for bankruptcy, die		l of \$600 or more?				
			■ No.	Go to line 7							
			□ Yes	include pay	each creditor to whom you pai ments for domestic support ol this bankruptcy case.						
	Cred	ditor's	s Name an	d Address	Dates of payme	nt Total amount	Amount you still owe	Was this p	payment for		
						p.au					

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

7.	Within 1 year before you filed for bankrupto <i>Insiders</i> include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 17 alimony.	rtners; relatives of any gene control, or owner of 20% or	eral partners; partners of their voting	erships of which yo g securities; and a	u are a genera ny managing a	Il partner; corporations gent, including one for
	No☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
3.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cosi			iny property on a	ccount of a de	ebt that benefited an
	■ No □ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
Pai	rt 4: Identify Legal Actions, Repossession	s. and Foreclosures	puid	oliii owe	molade orea	noi o name
).	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No					
	Yes. Fill in the details. Case title	Nature of the case	Court or agency		Status of th	e case
	Case number City of Cleveland Heights c/o RITA	Complaint for	Cleveland Heig	ıhte	☐ Pending	
	Plaintiff	Money	Municipal Court		☐ On appeal ☐ Concluded	
	V				■ Conclude	ed
	Latonya D. Hayes Defendant CVF1600755					
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below		rty repossessed, f	oreclosed, garnis	shed, attached	l, seized, or levied?
	■ No. Go to line 11.□ Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened				hishard
l1.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details.		uding a bank or fir	nancial institution	i, set off any a	mounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at ■ No ■ Yes		rty in the possessi			fit of creditors, a

Case number (if known)

Official Form 107

Debtor 1 Latonya D. Hayes

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Deb	btor 1 Latonya D. Hayes		Case number	(if known)	
				·	
Par	rt 5: List Certain Gifts and Contributions	3			
13.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift.	ıptcy,	did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$600 per person		Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift or co		did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	otal	Describe what you contributed	Dates you contributed	Value
Par	rt 6: List Certain Losses				
15.	Within 1 year before you filed for bankrup or gambling?	tcy or	since you filed for bankruptcy, did you lose any	thing because of the	t, fire, other disaster,
	■ No □ Yes. Fill in the details.				
	how the loss occurred	Include	ibe any insurance coverage for the loss e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	rt 7: List Certain Payments or Transfers				
16.	consulted about seeking bankruptcy or p	repari	id you or anyone else acting on your behalf pay on going a bankruptcy petition? rs, or credit counseling agencies for services require		rty to anyone you
	□ No				
	Yes. Fill in the details.			_	
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	ou.	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Debra Booher & Associates Co., LP. 1350 Portage Trail Cuyahoga Falls, OH 44223 charlotte@bankruptcyinfo.com		Attorney Fees	4/12/2019	\$1,500.00
17.	Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that	itors c		or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was	Amount of payment
				made	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Yes. Fill in the details.

Name of Storage Facility
Address (Number, Street, City, State and ZIP Code)

Who else has or had access to it?

Address (Number, Street, City, State and ZIP Code)

Describe the contents

Do you still have it?

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Pai	t 9: Identify Property You Hold or Control for S	omeone Else					
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.						
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value			
Pai	t 10: Give Details About Environmental Informat	ion					
For	the purpose of Part 10, the following definitions a	pply:					
	Environmental law means any federal, state, or lotoxic substances, wastes, or material into the air regulations controlling the cleanup of these substances.	, land, soil, surface water, ground	- •				
	Site means any location, facility, or property as d to own, operate, or utilize it, including disposal s	-	aw, whether you now own, operate, o	or utilize it or used			
	Hazardous material means anything an environm hazardous material, pollutant, contaminant, or si	nental law defines as a hazardous	waste, hazardous substance, toxic s	substance,			
Rep	ort all notices, releases, and proceedings that you	ı know about, regardless of wher	they occurred.				
24.	Has any governmental unit notified you that you	may be liable or potentially liable	under or in violation of an environme	ental law?			
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any r	elease of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site	Governmental unit	Environmental law, if you	Date of notice			
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)					
26.	Have you been a party in any judicial or administ	rative proceeding under any envi	ronmental law? Include settlements a	and orders.			
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Pai	t 11: Give Details About Your Business or Conn	ections to Any Business					
27.	Within 4 years before you filed for bankruptcy, di	id you own a business or have an	y of the following connections to any	business?			
	☐ A sole proprietor or self-employed in a tr						
	☐ A member of a limited liability company (LLC) or limited liability partnershi	ip (LLP)				
	☐ A partner in a partnership						
	☐ An officer, director, or managing executiv	☐ An officer, director, or managing executive of a corporation					
☐ An owner of at least 5% of the voting or equity securities of a corporation							

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

Best Case Bankruptcy

Debtor 1 Latonya D. Hayes Case number (if known)

	No. None of the above applies. Go to P	art 12.				
28.	Yes. Check all that apply above and fill in the details below for each business.					
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed			
	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.					
	■ No □ Yes. Fill in the details below.					
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued				

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 7

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Debtor 1 Latonya D. Hayes		Case number (if known)
Part 12: Sign Below		
are true and correct. I understand that	making a false statement, concealing pro ines up to \$250,000, or imprisonment for u	nts, and I declare under penalty of perjury that the answers perty, or obtaining money or property by fraud in connection p to 20 years, or both.
/s/ Latonya D. Hayes		
Latonya D. Hayes Signature of Debtor 1	Signature of Debtor 2	
Date May 8, 2019	Date	
Did you attach additional pages to You ■ No □ Yes	ur Statement of Financial Affairs for Individ	duals Filing for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone	who is not an attorney to help you fill out I	bankruptcy forms?
■ No		

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

				_
Fill in this infor	mation to identify your	case:		
Debtor 1	Latonya D. Hayes		Lank	
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DIS	TRICT OF OHIO	
Case number				
(if known)				☐ Check if this is an
00000	400			amended filing
Official Fo		n for Indiv	viduals Filing Under Chapt	ter 7 12/15
	lividual filing under chap		II out this form if:	
_	sed personal property a		not expired	
You must file th	is form with the court w ever is earlier, unless th	ithin 30 days after	you file your bankruptcy petition or by the date a le time for cause. You must also send copies to t	
	eople are filing together nd date the form.	in a joint case, bo	oth are equally responsible for supplying correct	information. Both debtors must
	and accurate as possib our name and case nun		s needed, attach a separate sheet to this form. O	n the top of any additional pages,
Part 1: List Y	our Creditors Who Have	Secured Claims		
•	-	art 1 of Schedule D	2: Creditors Who Have Claims Secured by Proper	ty (Official Form 106D), fill in the
information b Identify the ci	elow. reditor and the property th	nat is collateral	What do you intend to do with the property th secures a debt?	at Did you claim the property as exempt on Schedule C?
	#1-Stonegate Mortgag	je	☐ Surrender the property.	□ No
name:			☐ Retain the property and redeem it.☐ Retain the property and enter into a	Yes
Description of	20551 Trebec Blvd		Reaffirmation Agreement.	_ 103
property securing debt	OH 44119 Cuyaho	ga County	☐ Retain the property and [explain]:	
			_	
Creditor's Iname:	First Investors		☐ Surrender the property.	□ No
name.			☐ Retain the property and redeem it.☐ Retain the property and enter into a	■ Yes
Description of		er 58,000	Retain the property and enter into a Reaffirmation Agreement.	_ 100
property securing debt	miles :		☐ Retain the property and [explain]:	

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 1

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Best Case Bankruptcy

Debtor 1 Latonya D. Hayes	Case number (if known)
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 2

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Deb	btor 1 Latonya D. Hayes	Case number (if known)
Par	rt 3: Sign Below	
	ler penalty of perjury, I declare that I have indica perty that is subject to an unexpired lease.	ated my intention about any property of my estate that secures a debt and any personal
X	/s/ Latonya D. Hayes	X
	Latonya D. Hayes	Signature of Debtor 2
	Signature of Debtor 1	
	Date May 8, 2019	Date

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 3

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Best Case Bankruptcy

FIII II	n this information to identify your case:			ieck or 2A-1Si		irected in this form and	in Form
Debt	tor 1 Latonya D. Hayes			2/1 10	ирр.		
Debt (Spou	tor 2			■ 1. T	here is no pres	umption of abuse	
Unite	ed States Bankruptcy Court for the: Northern District o	f Ohio				o determine if a presui	•
Coo	o number					nade under <i>Chapter 7</i> icial Form 122A-2).	Means Test
(if kno	e number wn)			□ 3. T	he Means Test	does not apply now be	ecause of
						service but it could ap	
				☐ Ch	eck if this is a	n amended filing	
Off	<u>icial Form 122A - 1</u>						
Ch	apter 7 Statement of Your Cur	rent Mor	nthly Inc	om	е		12/15
attach case i qualif Part		which the addition of a presumption of the from Presur	nal information a of abuse becau	applies ise you	On the top of an	ny additional pages, wri narily consumer debts o	te your name and or because of
1.	What is your marital and filing status? Check one on	ıly.					
	Not married. Fill out Column A, lines 2-11.						
	☐ Married and your spouse is filing with you. Fill ou			2-11.			
	Married and your spouse is NOT filing with you.	•	•				
	☐ Living in the same household and are not lega	, ,			. ,		
	☐ Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are legiving apart for reasons that do not include evadir	egally separated	d under nonbar	krupto	y law that applie	es or that you and you	
10 the	Il in the average monthly income that you received from all and (10A). For example, if you are filing on September 15, the 6-me 6 months, add the income for all 6 months and divide the total bouses own the same rental property, put the income from that p	onth period would by 6. Fill in the re	be March 1 thro	ugh Auq de any i	gust 31. If the amount m	ount of your monthly incomore than once. For examp	ne varied during ole, if both
				Colur Debt		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and commission	ons (before all	\$	4,626.01	\$	
3.	Alimony and maintenance payments. Do not include Column B is filled in.	payments from	a spouse if	\$	0.00	\$	
	All amounts from any source which are regularly pa of you or your dependents, including child support. from an unmarried partner, members of your household and roommates. Include regular contributions from a sp filled in. Do not include payments you listed on line 3.	Include regular d, your depende	contributions nts, parents,	\$	0.00	\$	
5.	Net income from operating a business, profession,						
			otor 1				
	Gross receipts (before all deductions)	\$ 0.00 -\$ 0.00					
	Ordinary and necessary operating expenses	0.00	Copy here ->	\$	0.00	\$	
6.	Net monthly income from a business, profession, or farm Net income from rental and other real property	пф	200, 11010	–		Ť	
0.	Tot modific from roman and other real property	Dek	otor 1				
	Gross receipts (before all deductions)	\$ 0.00					
	Ordinary and necessary operating expenses	-\$ 0.00					
	Net monthly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 1

Best Case Bankruptcy

0.00

7. Interest, dividends, and royalties

					0.1.1		0 / 0		
					Column A Debtor 1		Column B Debtor 2 or non-filing s		
8.	Unemploy	nent compensation			\$	0.00	\$		
		r the amount if you contend that the amoun security Act. Instead, list it here:	t received was a bene	efit under					
	For you	\$	0	.00					
	For your	\$ spouse \$							
9.	Pension or	retirement income. Do not include any an er the Social Security Act.		as a	\$	0.00	\$		
10.	Do not inclureceived as	m all other sources not listed above. Spe de any benefits received under the Social S a victim of a war crime, a crime against hur rrorism. If necessary, list other sources on a	Security Act or payme manity, or internationa	nts al or					
					\$	0.00	\$		
					\$	0.00	\$		
	То	tal amounts from separate pages, if any.			\$	0.00	\$		
11.		our total current monthly income. Add lir n. Then add the total for Column A to the to		\$	4,626.01	+ \$		\$_	4,626.01
Part 12.	Calculate y	rour current monthly income for the year your total current monthly income from line?	. Follow these steps:		Сор	y line 11 ł	nere=>	\$	4,626.01
		y by 12 (the number of months in a year)						X	12
	•								
	12b. The re	sult is your annual income for this part of the	e form				12b	· \$	55,512.12
13.	Calculate t	he median family income that applies to	you. Follow these ste	eps:					
	Fill in the st	ate in which you live.	ОН						
	Fill in the nu	umber of people in your household.	2						
Fill in the median family income for your state and size of household.							\$	62,308.00	
		t of applicable median income amounts, go . This list may also be available at the bank		specified	in the separ	ate instruc	tions		
14.	How do the	e lines compare?							
	14a. ■	Line 12b is less than or equal to line 13. O Go to Part 3.	n the top of page 1, c	heck box	(1, There is	no presum	ption of abus	e.	
	14b. 🛚	Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	2, The pr	esumption o	f abuse is	determined by	/ Form 1	22A-2.

Official Form 122A-1

Debtor 1	Latonya D. Hayes	Case number (if known)
Part 3:	Sign Below	
	By signing here, I declare under penalty of perjury that	the information on this statement and in any attachments is true and correct.
	X /s/ Latonya D. Hayes	
	Latonya D. Hayes Signature of Debtor 1	
Da	May 8, 2019 MM / DD / YYYY	
	If you checked line 14a, do NOT fill out or file Form 12	2A-2

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Official Form 122A-1 Chapter 7 Statement of Your Current Monthly Income

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquid	ation
\$24	5 filing fee	
\$7	5 administ	rative fee
+ \$1	5 trustee s	<u>urcharge</u>
\$33	5 total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	¢310	total foo

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#1-Stonegate Mortgage
PO Box 790309
Saint Louis, MO 63179

#2-City of Cleveland Heights
c/o RITA
40 Severance Circle
Cleveland, OH 44118

First Investors 380 Interstate North Pkwy., 3rd Fl. Atlanta, GA 30339

RITA PO Box 470537 Broadview Heights, OH 44147

Amazon PO Box 960013 Orlando, FL 32869-0013

American Express PO Box 1270 Newark, NJ 07101

Capital One Attn: Bankruptcy Department PO Box 30285 Salt Lake City, UT 84130-0285

Chase Attn: Bankruptcy Dept. PO Box 15298 Wilmington, DE 19850-5298

Citi Card Attn: Bankruptcy Dept. PO Box 6062 Sioux Falls, SD 57117

Citi Card c/o Radius Global Solutions PO Box 390905 Minneapolis, MN 55439

Citibank/Home Depot PO Box 790034 Saint Louis, MO 63179-0034

Citibank/Home Depot c/o Radius Global Solutions PO Box 390905 Minneapolis, MN 55439

City of Cleveland Heights c/o Atty. Cliff Babcock 30455 Solon Road Solon, OH 44139

Cleveland Clinic PO Box 89410 Cleveland, OH 44101

Cleveland Clinic c/o Phoenix Financial Services PO Box 361450 Indianapolis, IN 46236

Cleveland Clinic Physicians PO Box 89410 Cleveland, OH 44101

Cleveland Clinic Physicians c/o First Federal Credit Control 24700 Chagrin Blvd., Suite 205 Beachwood, OH 44122

Cleveland Clinic/Hillcrest Hospital PO Box 89410 Cleveland, OH 44101

Cleveland Clinic/Hillcrest Hospital c/o First Federal Credit Control 24700 Chagrin Blvd., Suite 205 Beachwood, OH 44122

Cleveland Clinic/Hillcrest Hospital c/o JP Recovery Services PO Box 16749 Rocky River, OH 44116

Comenity Bank/Giant Eagle Bankruptcy Dept. PO Box 182125 Columbus, OH 43218-2125

Comenity Bank/HSN Bankruptcy Dept. PO Box 182125 Columbus, OH 43218-2125

Comenity Bank/Wayfair Bankruptcy Dept. PO Box 182125 Columbus, OH 43218-2125

Credit First PO Box 81344 Cleveland, OH 44188-0344

Credit One PO Box 60500 City Of Industry, CA 91716

Discover PO Box 6103 Carol Stream, IL 60197-6103

Discover c/o Radius Global Solutions PO Box 390846 Minneapolis, MN 55439

Emergency Professional Services c/o Account Resolution Services 1643 N. Harrison Pkwy. Bldg. H Fort Lauderdale, FL 33323

Emergency Professional Services PO Box 740021 Cincinnati, OH 45274

Enhanced Recovery Corp 8014 Bayberry Rd Jacksonville, FL 32256

Hillcrest Hospital c/o Phoenix Financial Services PO Box 361450 Indianapolis, IN 46236

JC Penney/Synchrony Bank Bankruptcy Department PO Box 103104 Roswell, GA 30076

Lending Club
71 Stevenson Street, Suite 300
San Francisco, CA 94105

Lending Club c/o CKS Financial PO Box 2856 Chesapeake, VA 23327

Paypal Credit PO Box 71202 Charlotte, NC 28272-1202

Paypal Extra PO Box 105658 Atlanta, GA 30348

PNC Bank PO Box 856177 Louisville, KY 40285

QVC PO Box 2254 West Chester, PA 19380

University Hospital Attn: #8792M PO Box 14000 Belfast, ME 04915

Wal-Mart PO Box 530927 Atlanta, GA 30353

Wells Fargo PO Box 660041 Dallas, TX 75266-0041

United States Bankruptcy Court Northern District of Ohio

In re	Latonya D. Hayes		Case No.	
		Debtor(s)	Chapter	7
VERIFICATION OF CREDITOR MATRIX				
The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.				
Date:	May 8, 2019	/s/ Latonya D. Hayes		
		Latonya D. Hayes		
		Signature of Debtor		